PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

MAY 1 9 2009 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/584,905 **Application Number** FEE TRANSMITTAL Filing Date May 16, 2007 For FY 2009 **Ernst-Werner WAGNER** First Named Inventor **Examiner Name** S. M. Cernoch Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3752 (\$) **TOTAL AMOUNT OF PAYMENT** 1,170.00 30000.0002 Attorney Docket No. **METHOD OF PAYMENT** (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 50-0951 Deposit Account Name: AKERMAN SENTERFITT, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Fees Paid (\$) Fee (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee_(\$) Fee (\$) Utility 220 330 165 270 540 110 220 Design 110 100 140 50 70 220 Plant 110 330 170 165 85 330 Reissue 165 540 650 270 325 220 110 **Provisional** 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** <u>Fee (\$)</u> **Fee Description** Fee (\$) Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 Fee Paid (\$) **Total Claims Extra Claims Multiple Dependent Claims** Fee (\$) -20 or HP =Fee (\$) Fee Paid (\$) ___ x __ HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee Paid (\$) Indep. Claims Fee (\$) -3 or HP =HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets** Extra Sheets Fee Paid (\$) _____ / 50 = _____ (round up to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): RCE fee (\$810) and Petition for 2nd Month Extension of Time fee (\$360) \$1,170.0

SUBMITTED BY			
Signature	taul &	Registration No. 41,728 (Attomey/Agent)	Telephone 703-394-1380
Name (Print/Type)	Jean C. Edwards		Date May 19, 2009

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/21 (02-09)

Approved for use through 03/31/2009. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE he Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/584,905 Filing Date TRANSMITTAL May 16, 2007 First Named Inventor **FORM Emst-Werner WAGNER** Art Unit 3752 **Examiner Name** S. M. Cernoch (to be used for all correspondence after initial filing) **Attorney Docket Number**

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			This Submission							
ENCLOSURES (Check all that apply)										
V	Fee Trans	smittal Fo	orm		Drawing(s)		After	Allowance Communication to TC		
	Fe Fe	ee Attach	ed		Licensing-related Pa	apers	1 1 1 ' '	al Communication to Board peals and Interferences		
	Affidavits/declaration(s)			Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Request for Continued Examination (RCE) Transmittal			
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Remarks Please charge any fees or credit any overpayments to Deposit Account No. 50-0951.							
			SIGNA	TURE	OF APPLICANT	, ATTORNEY, C	R AGENT			
Firm Name AKERMAN SENTERFITT,			, LLP							
	Signature Paul X. 1) ich (bg. 33, 102									
Printed name Jean C. Edwards										
Date	_~/	May 19,	2009			Reg. No.	41,728			
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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature										
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